1221383

FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	May/31, 2005
Estimated averag	e burden
hours per respons	

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SECTION 4(6), AND/OR	DATE RECEIVED	
UNIFORM LIMITED OFFERING EXEMPTION		
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Aleon NCOVIDED Strong Color Strong Color Section 4(6) ULOE Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment		
A. BASIC IDENTIFICATION DATA		
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Air on Incorporated		
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephon 11615 Shady Ridge: Little Rock, AR 72011 50	ne Number (Including Area Code) 1.779.1248 one Number (Including Area Code)	
Brief Description of Business Computer Manufacturer	FOEWED	— >=ccef
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	APR (1 APR	23 2003
Actual or Estimated Date of Incorporation or Organization: Month Year	180 / SI	NANCIAL
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6).	5), 17 CFR 230.501 et seq. or 15 U	.s.c.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if re which it is due, on the date it was mailed by United States registered or certified mail to that address.		
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.		
Conjug Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. At	ny conies not manually signed mu	st be

Filing Fee: There is no federal filing fee.

not be filed with the SEC.

photocopies of the manually signed copy or bear typed or printed signatures.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filling of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information re	equested for the fol	lowing:			
		suer has been organized w	•		
Each beneficial ow	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more o	f a class of equity securities of the issue
		•	corporate general and man	naging partners of	f partnership issuers; and
Each general and r	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	Smith, K	ent		
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ide) 56492 ; Lift	le Rock,	AR 72215
Check Box(es) that Apply:	Promoter	Seneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	Washinato	n Brandon	· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	56492; L	ittle Ra	K AR 70015
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		-11		
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				18
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
•	(Use bla	nk sheet, or copy and use	additional copies of this s	heet, as necessar	у)

1.	Has the	issuer solo	i, or does ti	he issuer i	ntend to se	ii, to non-a	ccredited i	nvestors in	this offer	ing?		Yes .	No □
	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
2.	What is	the minim	um investn	nent that w	ill be acce	pted from a	ny individ	lual?		*************		. s <u>3</u>	10.30
												Yes	No
3.		_	permit join		•							_	
4.	commis If a pers	sion or sim on to be lis s, list the na	tion request ilar remune ted is an ass ame of the b you may s	ration for s sociated po roker or de	solicitation erson or age caler. If me	of purchase ent of a brok ore than five	ers in conne ter or deale (5) person	ection with r registered is to be list	sales of sec i with the S ed are asso	curities in t SEC and/or	he offering with a stat	g. e	
Ful	Name (Last name	first, if indi	ividual)	2.1	l. V	م نمطر ک	ī.a					
Bus	iness or	Residence	Address (N	umber and		ity. State, 2		.10	······································				
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Nan	ne of Ass	sociated Br	oker or De	alcr	- ((. •					
Stat	cs in Wh	ich Person	Listed Has	Solicited	or Intends		ailab Purchasers	ne_					
			" or check							***************************************	***********	. 🔲 Al	l States
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		IN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	[K]	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (I	Last name	first, if indi	ividual)							· · · · · · · · · · · · · · · · · · ·		
Bus	iness or	Residence	Address (?	Number an	d Street, C	City, State, 2	Zip Code)						
No		i-t-d D	oker or De	-1	·								
1441	IIC UI AS	SOCIALCY DI	OKET OF DE	aicr .									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	***************************************	**********			**************	**************	. Al	1 States
	ΛL	ΛK	ΔZ	AR	CA	CO	CT]	DE	DC	FL	GΛ	HI	(II)
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	MT	NE I	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	IN	TX	[UT]	VT	VA	WA	WV	WI	WY	PR
Full	Name (I	Last name	first, if indi	ividual)									
Bus	iness or	Residence	Address (1	Yumber an	d Street, C	City, State,	Zip Code)		·····				<u>→</u>
Nan	ne of Ass	sociated Br	oker or De	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers			·	·		
-			or check							***************************************	*******	. 🗆 AI	States
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		[N	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

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1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt\$	Φ	$s \phi$
	Equity\$. 7
	Common Preferred		*
	Convertible Securities (including warrants)	5.29	s 370.30
	Partnership Interests		· 1/
	Other (Specify)\$		• 0
	Total\$		\$ 370.30
	Answer also in Appendix, Column 3, if filing under ULOE.		4Y
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		s
	Non-accredited investors		s 370.30
	Total (for filings under Rule 504 only)	•	S _
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		S
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$^
	Printing and Engraving Costs	X	s 30.00
	Legal Fees	8	s 75.00
	Accounting Fees		s
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	<u> </u>	\$
	Other Expenses (identify)		\$ 50.00
	Total		s 155.00

	A PAY AND THE TWO		ATHERIA A SPECIA		ry et		
	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C—proceeds to the issuer."	- Question 4.a. This diff	erence is the "adjusted gro	oss 		s <u> 215</u>	.3¢
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ny purpose is not know If the payments listed m	n, furnish an estimate a ust equal the adjusted gre	nd			
				Č Dir	ments to Officers, ectors, & filiates	Payme Othe	
	Salaries and fees			🔲 💲		□ s	
	Purchase of real estate			🗆 s _		□ s	
	Purchase, rental or leasing and installation of ma- and equipment			□ €			
	Construction or leasing of plant buildings and fac						
	Acquisition of other businesses (including the va			[
	offering that may be used in exchange for the ass	ets or securities of ano	ther				
	issuer pursuant to a merger)			_		_	
	Repayment of indebtedness						
	Working capital						
	Other (specify):			_ 🗆 \$_		□ \$	
				🔲 💲		□ s	
	Column Totals	••••••		🔲 \$		□ s	
	Total Payments Listed (column totals added)	·		••••	⊠ \$⊇	6.30	5
ign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to furnished by the issuer to any non-accordance.	e undersigned duly auth rnish to the U.S. Securi	orized person. If this notices and Exchange Com	mission,	upon written		_
ssu	er (Print or Type)	Signature		Date	01810	2	
	Alean Incorporated	Trial (2)	T.		0100	<u>ی</u>	
чал	ne of Signer (Print or Type)	Title of Signer (Prin		· 00.			
	Kent Snith	Chief	Executive 7	OHic	<u> </u>		
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		ATTENTIO	N				
	Intentional misstatements or omissions	of fact constitute fe	deral criminal violati	ons. (Se	e 18 U.S.C	. 1001.)	

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Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No.
See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Aiean Incorporated		6/8/03
Name (Print or Type)	Title (Print or Type)	
Kent Snith	Chief Executive	Officer

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	Intendato non-a	2 to sell accredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		X		0	0	0	0		
AK		X		0	0	0	0		
AZ		X		Ø	\mathcal{D}	ϕ			
AR	X		convertible	Φ	Ø	<u>,</u>	31030		X
CA		X		0	0	0	0		
со		X		0	0	0	Ð		
СТ		X_		0	0	0	0		
DE		X		0	0	0	0		
DC		X		0	0	0	0		
FL		X		0	0	0	0		
GA		X		0	0	0	0		
н		X_		0	0	0	0		
ID		X		0	0	0	0		
IL	•	X		0	0	0	0		
IN	i	X		0	0	0	0		
IA		X		0	0	<u> </u>	0		
KS		X		0	0	<u>O</u>	0		
KY		X_		0	0	0	0		
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ME		X		0	0	0	0		
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I	Intendation non-a	2 I to sell accredited s in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО		χ		D	0	0	0		
МТ		X		\mathcal{D}	0	0	0		
NE		, ,		Ö	0	0	0		
NV		X		0	0	0	0		
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NC		X		0	0	0	0		
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RI		χ		0	0	0	0		
SC		X		0	0	0			
SD		X		0	0	0	0		
TN		Χ		0	0	0	0_		A
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UT		Χ		0	0	D	0		
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VA		Х		0	0	0			-
WA		X		0	0	0	<u> </u>		
wv		X		D	0	0	0		
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				4.5					
l		2	3			4		5	
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	aggregate ag price Type of investor and amount purchased in State				under Sta (if yes, explana waiver	ification ate ULOE attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited			Yes	No
WY		Х		0	0	D	0		
PR		Χ		D	0	0	0		